

**CITY OF CROSSVILLE, TENNESSEE
APPLICATION FOR FIREWORKS PERMIT**

NAME OF BUSINESS: _____

LOCATION: _____

CONTACT PERSON: _____

DATES OF OPERATION (seasonal sales only): _____

TYPE OF PERMIT:	<input type="checkbox"/> Year-round sales	<input type="checkbox"/> Seasonal Sales
	<input type="checkbox"/> Manufacture	<input type="checkbox"/> Storage
	<input type="checkbox"/> Distribution	<input type="checkbox"/> Public Display

CHECKLIST:

- ☐ State Fire Marshall approval
- ☐ Certificate of insurance
- ☐ "No Smoking" signs
- ☐ Fire extinguishers
- ☐ Location
 - ☐ Distance from fuel source
 - ☐ Distance from operable fire hydrant
 - ☐ Distance from property line (not applicable to year-round sales)
 - ☐ Distance from on-site consumption of alcoholic beverages (not applicable to year-round sales)
 - ☐ Adequate parking (not applicable to year-round sales)
 - ☐ Tent construction and location (not applicable to year-round sales)

FOR CITY USE ONLY:

Date Application Received: _____

Date Approved: _____ Fire Dept. Signature: _____

Date Rejected: _____ Reason: _____

Permit No: _____

Expiration Date: _____

**Return application to: Valerie Hale, City Clerk, 392 N. Main, Crossville, TN 38555
Or email to: baylee.rhea@crossvilletn.gov**